

REQUEST FOR PROPOSAL (RFP)-Primary

Notice to Prospective Proposers

RFP Title: Specialty Mental Health Services Therapeutic Behavioral Services Consultation

RFP Number: 03-7381-000

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^{**}These documents are not required with the Proposal package but are required upon award of the contract.

A) Purpose and Description of Services

This is a Request for Proposal (RFP) to provide consultation and technical assistance to the Department of Mental Health (DMH) regarding implementation of the Early and Periodic Screening, Diagnosis and Treatment (EPSDT) supplemental specialty mental health services Medi-Cal benefit, Therapeutic Behavioral Services (TBS) in the most cost efficient and clinically effective manner possible.

The contractor will provide consultation and technical assistance to DMH in two primary areas:

- 1) Assisting mental health practitioners who assess for or deliver TBS under the auspices of local mental health plans (MHPs) to understand and fulfill the minimum qualifications (MQs) for delivery of TBS including informing such practitioners about the MQs and providing or arranging for the provision of training and technical assistance regarding standards and best practices for TBS.
- 2) Monitoring capacity for and access to TBS by MHPs and providing technical assistance to MHPs regarding capacity and access.

The contract awarded through this RFP will begin August 18, 2003 and end June 30, 2006. (Contingent on the appropriation of funds by the Legislature.) Services may be provided by the contractor or through sub-contracting with other providers, contingent upon approval of DMH. The priority for the first year of the contract, fiscal year (FY) 2003/04, is completion of a training program on the concepts of functional behavioral analysis and positive behavioral interventions, and their applicability to TBS. Training in these areas is one of the MQs that TBS providers must meet. Priorities for subsequent years of the contract will be established each year by DMH in consultation with the contractor.

Background

TBS is an intensive one-to-one, short-term outpatient treatment intervention for children and youth with serious emotional problems or mental illness who are experiencing a stressful transition or life crisis and need additional short-term support to prevent placement in a group home of Rate Classification Level (RCL) 12 through 14 or a locked facility for the treatment of mental health needs, or to enable a transition from any of those levels to a lower level of residential care. It is an expanded Medi-Cal Early and Periodic Screening, Diagnosis and Treatment (EPSDT) outpatient specialty mental health service. Implementation of TBS is required by a preliminary injunction issued June 1999 as a part of the class action lawsuit, Emily Q. v. Bontá, (C.D.Cal., 2001, CV 98-4181 AHM (AIJx)). The Order Granting Plaintiffs' Motion for Permanent Injunction was issued March 30, 2001 and the Judgment and Permanent Injunction was entered May 11, 2001.

TBS is intended to supplement other specialty mental health services by addressing the target behavior(s) that affect the child or youth's ability to maintain a current living

situation or make a planned transition to a lower level of placement. The purpose of providing TBS is to further the child or youth's overall treatment goals by providing additional therapeutic services during a short-term period. The person providing TBS is available on-site to provide individualized one-to-one behavioral assistance and one-to-one interventions to accomplish outcomes specified in the written treatment plan generally prepared by a therapeutic team.

TBS is delivered as a specialty mental health Medi-Cal benefit by a single managed mental health care plan in each county. In its role as a MHP, counties are responsible for offering an array of specialty mental health services including TBS consistent with standards set by the State, in accordance with federal Medicaid requirements. All eligible Medi-Cal beneficiaries must receive their specialty mental health services through their MHP.

MQs for mental health practitioners

The court order requires the following MQs be implemented.

"Defendant shall adopt standards for minimum qualifications (MQs) for mental health practitioners to assess and/or provide TBS to class members. These qualifications shall include training in behavior analysis with an emphasis on positive behavioral interventions

- A. Defendant shall not require that these mental health providers be existing participants in the Medi-Cal program or that these providers agree to participant in the Medi-Cal program for any other purpose besides assessing eligibility for TBS and/or providing TBS.
- B. Defendant shall inform all such providers of the procedures for contracting with the MHP to receive Medi-Cal EPSDT reimbursement pursuant to this Permanent Injunction and 22 C.C.R. § 51242, which specifies the qualifications required of an EPSDT supplemental services provider.
- C. A MHP may allow a provider to participate in its managed care Medi-Cal program solely to provide TBS and no other service.
- D. This provision does not require Defendant or any MHP to appoint and/or compensate as a provider any person or entity who or which would not otherwise be eligible to provide services to class members."

The training includes statewide training to all mental health providers assessing for and/or delivering direct TBS services and involves two phases. Phase I of the training, designed for those individuals involved in assessing children and young people to determine if TBS would be appropriate within the context of other specialty mental health services has already been developed and is in implementation. Six face to face regional trainings, and 20 video conferencing trainings available to all MHPs have been completed. The final step in Phase I is completion of a self study package for distribution to all MHPs consisting of a professionally produced videotape and CD of the five hour training, a written curriculum and a certification process for all

attendees. Phase II of the training for individuals directly providing the TBS services is still in development. The curriculum has been drafted and is being reviewed by stakeholders. The organization or individual to whom this contract is awarded will use the work already completed as a framework to complete the design and delivery of Phase II.

Procedures for informing mental health practitioners of the procedures for contracting with the MHP to receive Medi-Cal EPSDT reimbursement have not yet been identified, however it is assumed that both MHPs and DMH will have responsibilities to comply with this requirement.

Monitoring capacity and access

DMH uses data collected from a variety of sources to track capacity and access patterns, and identify areas for follow up including paid claims data and data obtained from notification forms that MHPs are required to submit (when TBS is initiated, then every quarter thereafter). Additionally, as part of the monitoring capacity and access responsibilities, as ordered by the court, DMH provides certain information to the plaintiff's attorneys in this case on a quarterly basis. These reports include:

- Information regarding notices of initiation and continuation of TBS as well as denials of provider requests for authorization of TBS received by DMH from the MHPs.
- 2) Copies of certification forms completed when MHPs have determined that TBS is inappropriate and that a beneficiary must be placed in a higher level of care such as a RCL 12-14 group home.
- 3) Lists of TBS providers obtained from MHPs.
- 4) Information regarding training provided by or under the auspices of DMH.
- 5) Information regarding any corrective measures taken by DMH with regard to implementation of TBS by the MHPs.

B. Minimum Qualifications for Proposers

The Proposer must have:

- 1. Experience in or a demonstrated knowledge of California's managed public mental health care system.
- 2. Background and experience on a statewide basis in:
 - Providing training on specialty mental health issues.
 - Providing technical assistance on specialty mental health issues.
 - Monitoring of and providing technical assistance on specialty mental health capacity and access.

To enable an evaluation of the proposer's experience, knowledge and background, the proposer must provide a comprehensive list of prior mental health experience including a description of responsibilities and length of service at each job with specific reference to the above minimum qualifications. The list must include references with names, addresses and phone numbers for the most recent three years of experience. The references provided by the proposer will be contacted to verify the above minimum requirements.

C. Proposal Requirements and Information

1) Key Action Dates

<u>Event</u>	<u>Date</u>
RFP available to prospective proposers	July 1 2003
Letter of Intent Deadline	July 11, 2003
Written Question Submittal Deadline	July 17, 2003
Final Date for Proposal Submission	July 31, 2003
Cost Proposal Opening	August 6, 2003
Notice of Intent to Award	August 8, 2003
Proposed Award Date	August 18, 2003

2) Letters of Intent

Each proposer must submit a **Letter of Intent** via US Mail or FAX only. The letter must be received no later than **5:00 p.m. on July 11, 2003**, and sent to the following address (postmarks will not be accepted):

Nancy Mengebier
California Department of Mental Health
1600 9th Street, Room 100
Sacramento, CA 95814
FAX 916-654-5591

3) Written Question submittal deadline.

Questions must be received via email addressed to nmengebi@dmhhq.state.ca.us no later than **4:00 p.m.**, **July 11**, **2003**. A Question and Answer document will be mailed to all proposers who submit a letter of intent.

4) Work Plan Requirements

a). The proposer shall submit a work plan for the entire contract period, FY 2003/04 through FY 2005/06, broken out by fiscal year. The number of pages of the total work plan cannot exceed 20 (twenty) double spaced typewritten pages. The work plan must follow the outline below.

Work Plan Outline

- I. Document comprehensive knowledge and understanding of the background and stipulations of the class action lawsuit Emily Q. v. Bontá (C.D.Cal., 2001, CV 98-4181 AHM (AlJx)) especially as they relate to MQs for mental health practitioners, informing such practitioners about the MQs and capacity and access issues.
- II. Provide evidence of a comprehensive knowledge and understanding of TBS concepts, design and delivery system.
- III. Specify how tasks for Component 1 "Assisting mental health practitioners who assess for or deliver TBS to understand and fulfill the minimum qualifications (MQs) for delivery of TBS" described below would be implemented:
 - A. Delivery of the remainder of Phase I of a training program in applying concepts of functional behavioral analysis and positive behavior interventions statewide.
 - 1) Demonstrate familiarity with the training on TBS provided to date to comply with the stipulations of <u>Emily Q. v. Bontá</u> under DMH auspices.
 - 2) Document familiarity with and knowledge of concepts of positive behavioral analysis and positive behavioral interventions.
 - 3) Include strategies for obtaining DMH approval of materials used for training.
 - B. Completion of the design and delivery of Phase II of the training programs in applying concepts of functional behavioral analysis and positive behavior interventions. The design must:
 - 1) Be consistent with Phase I of the training,
 - 2) Include plans for statewide access to training material,
 - 3) Assure delivery of the training to direct TBS providers including those providers hired by or through an MHP after that MHP has received the training.
 - 4) Include a provision for providing certificates of attendance to all participants, specify modalities to be used (e.g. face-to-face, telephonic, web based, and self-study) and a tentative timeline and schedule and include strategies for DMH review and approval prior to release

C. Informing Materials

1) Develop material for informing mental health practitioners about how they might go about contracting with a MHP to receive Medi-Cal EPSDT reimbursement for supplemental specialty mental health services. This material will include information on the MQs that must be met including training in functional behavior analysis and positive behavioral interventions. Modalities, which may be considered, include direct mailing, advertising in professional newsletters and others suggested by the contractor.

D. Ongoing training and technical assistance

- 1) Maintain availability to all MHPs during regular business hours to discuss the status of TBS implementation and offer assistance as needed. Assistance may include but is not limited to case consultations, the development and dissemination of information such as sample forms, summaries of training and training handouts on a statewide, regional and county specific basis. Availability may include face-to-face contact, phone calls and web based assistance.
- 2) Identify other training and technical assistance needs related to TBS. Research issues raised, analyze data and information, and suggest strategies related to those needs.
- IV. Specify how tasks for Component 2 "Monitoring capacity for and access to TBS by MHPs and providing technical assistance to MHPs regarding capacity and access" described below would be implemented

A. Identify strategies to:

- 1) Identify capacity and access patterns for MHPs on a regularly scheduled basis;
- 2) Identify MHPs whose capacity and access patterns fall outside the monitoring capacity and access pattern of MHPs of similar population and/or the statewide average (including both high-end and low-end utilizers);
- 3) Provide this information to DMH
- 4) In consultation with DMH, provide or arrange for the provision of technical assistance to assist the MHP in determining the reason for their high or low capacity and access pattern, or to assist them in developing strategies and interventions to provide the appropriate level of TBS.
- B. Recommend and implement strategies for complying with stipulations in Emily Q. vs. Bonta to provide information to plaintiff's attorneys on a quarterly basis. These must include:
 - 1) Notices of initiation and continuation of TBS and denials of provider requests for authorization of TBS received by DMH from the MHPs.

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- 2) Copies of certifications when MHPs have determined that TBS is inappropriate and that a beneficiary must be placed in a higher level of care such as a group home of Rate classification 12-14.
- 3) Lists of TBS providers obtained from MHPs.
- 4) Information regarding training provided by or under the auspices of DMH.
- 5) Information on any corrective measures taken by DMH in regards to implementation of TBS by the MHPs.

b) Project Personnel

The proposer must identify the individuals including subcontractors, if applicable, that will perform all duties of the contract. Document how the individual(s) meet the minimum qualifications outlined above. Resumes or vitae must be submitted as, at a minimum, part of this documentation (Note: Resume(s)/Vitae must be included as attachment 4. Refer to the Required Attachment Checklist, page 18).

5) Cost Proposal Format

Submit a separate cost proposal for each year of the contract (FY's 2003/04, 2004/05 and 2005/06). The total cost for each fiscal year may not exceed \$100,000 annually. In addition, the cost for each component addressed in the work plan may not exceed \$50,000 annually. Use the Sample Cost Proposal Worksheet (Attachment 5) as a guide in preparing your cost proposals.

6) Submission of Proposal

- a) Proposals should provide straightforward and concise descriptions of the proposer's ability to satisfy the requirements of this RFP. The proposal must be complete and accurate. Omissions, inaccuracies or misstatements will be sufficient cause for rejection of a proposal.
- b) All proposals must be submitted under **sealed** cover and sent to Department of Mental Health by dates and times shown in Section C, Proposal Requirements and Information, Item 1) Key Action Dates, (page 6). Proposals received after this date and time will not be considered.
- c) A minimum of **5 copies** of the proposal must be submitted.
- d) The original proposal must be marked "ORIGINAL COPY". All documents contained in the original proposal package must have original signatures and must be signed by a person who is authorized to bind the proposing firm. All additional proposal sets may contain photocopies of the original package.
- e) The proposal envelopes must be plainly marked with your agency name and address, the RFP number and title, and must be marked with "DO NOT OPEN", as shown in the following example:

(Agency Name and Address) (RFP Number) (RFP Title) DO NOT OPEN

If the proposal is made under a fictitious name or business title, the actual legal name of proposer must be provided.

The bid price and all cost information must be submitted in a separate sealed envelope. The envelope should be affixed to the outside of the proposal package and marked "Sealed Cost Proposal-DO NOT OPEN".

Proposals not submitted under sealed cover and marked as indicated may be rejected.

- f) All proposals shall include the documents identified in Section E, Required Attachment Checklist (see page 18). Proposals not including the proper "required attachments" shall be deemed non-responsive. A non-responsive proposal is one that does not meet the basic proposal requirements.
- g) Mail or deliver proposals to the following address:

<u>U.S. Postal Service Deliveries or Hand Deliveries</u> (UPS, Express Mail, Federal Express)

Department of Mental Health, Contracts Office 1600 9th Street, Room 150 Sacramento, CA 95814

All proposals must be received no later than 3:00 pm on Thursday July 31, 2003. Postmarks will not be accepted.

- h) Proposals must be submitted for the performance of all the services described herein. Any deviation from the work specifications will not be considered and will cause a proposal to be rejected.
- i) A proposal may be rejected if it is conditional or incomplete, or if it contains any alterations of form or other irregularities of any kind. The State may reject any or all proposals and may waive any immaterial deviation in a proposal. The State's waiver of immaterial deviation shall in no way modify the RFP document or excuse the proposer from full compliance with all requirements if awarded the agreement.
- j) Costs incurred for developing proposals and in anticipation of award of the agreement are entirely the responsibility of the proposer and shall not be charged to the State of California.

- k) An individual who is authorized to bind the proposing firm contractually shall sign the Attachment 2, Proposal/Proposer Certification Sheet, page 19. The signature must indicate the title or position that the individual holds in the firm. An unsigned proposal may be rejected.
- I) A proposer may modify a proposal after its submission by withdrawing its original proposal and resubmitting a new proposal prior to the proposal submission deadline as set forth in the Key Action Dates. Proposal modifications offered in any other manner, oral or written, will not be considered.
- m) A proposer may withdraw its proposal by submitting a written withdrawal request to the State, signed by the proposer or an authorized agent in accordance with h) above. A proposer may thereafter submit a new proposal prior to the proposal submission deadline.
- n) The awarding agency may modify the RFP prior to the date fixed for submission of proposals by the issuance of an addendum to all parties who received a proposal package.
- o) The awarding agency reserves the right to reject all proposals. The agency is not required to award a contract.
- p) Before submitting a response to this solicitation, bidders should review, correct all errors and confirm compliance with the RFP requirements.
- q) The State does not accept alternate contract language from a prospective contractor. A proposal with such language will be considered a counter proposal and will be rejected. The State's General Terms and Conditions (GTC) are not negotiable.
- r) No oral understanding or agreement shall be binding on either party.

7) Evaluation Process

- a) At the time of proposal opening, each proposal will be checked for the presence or absence of required information in conformance with the submission requirements of this RFP.
- b) Proposals that contain false or misleading statements, or which provide references, which do not support an attribute or condition claimed by the proposer, may be rejected.
- c) The final selection will be made to the lowest monetary responsible proposer achieving a passing score, after application of preferences.
- d) Phase 1

The proposals that meet the minimum qualifications will be evaluated and scored according to the criteria indicated below. A minimum of 96 points must be achieved in this phase to be considered responsive. (A responsive proposal is one, which meets or exceeds the requirements stated in this RFP).

Rating/Scoring Criteria	Maximum Points Possible
I. The Proposer's work plan documents comprehensive knowledge and	
understanding of the background and stipulations of the class action lawsuit Emily Q. v. Bontá (C.D.Cal., 2001, CV 98-4181 AHM (AlJx)) especially as they relate to MQs for mental health practitioners, informing such	10
practitioners about the MQs and capacity and access issues	10
II. The Proposer's work plan provide evidence of a comprehensive knowledge and understanding of TBS concepts, design and delivery system.	10
III. A. The Proposer's work plan demonstrates ability and expertise to complete delivery of Phase I of a training program in applying concepts of functional behavioral analysis and positive behavior interventions to TBS	
statewide. The work plan: 1) Demonstrates familiarity with the training on TBS provided to date to comply with the stipulations of Emily Q vs. Bonta under DMH	
auspices.	5
Documents familiarity with and knowledge of concepts of positive behavioral analysis and positive behavioral interventions.	5
Includes strategies for obtaining DMH approval of materials used for training.	5
Total possible points for III A	15

Maximum Points

5

10

	Possible
III. B The Proposer's work plan demonstrates ability and expertise to complete and deliver Phase II of the training programs in applying concepts of functional behavioral analysis and positive behavior interventions. The	
work plan: 1) Provides for a design that is consistent with Phase I of the training.	5
2) Provides for statewide access to training material.	5
 Assures delivery of the training to direct TBS providers, including providers hired by or through an MHP after that MHP has received the training. 	5
4) Includes a provision for providing certificates of attendance to all participants, specifies modalities to be used and a tentative timeline. Provides for DMH review and approval of training material prior to release.	5
Total possible points for #III B	
	20
 III. C Informing Material 1) The Proposer's work plan demonstrates the ability and expertise to develop material for informing mental health practitioners about how they might go about contracting with an MHP to receive Medi-Cal EPSDT reimbursement for supplemental specialty mental health services. 	5
2) The work plan includes strategies to provide information on the	

Rating/Scoring Criteria

MQs that must be met including training in functional behavior

analysis and positive behavioral interventions.

Total possible points # III C

Rating/Scoring Criteria	Maximum Points Possible
III D Ongoing Training and Technical Assistance 1) The Proposer's work plan demonstrates ability and expertise to maintain availability to all MHPs during regular business hours to discuss the status of TBS implementation and offer assistance as needed.	5
2)The Proposer's work plan demonstrates the ability and expertise to identify other training and technical assistance needs related to TBS, to research issues analyze data and information and suggest strategies associated with those needs Total possible points # III D	5
	10
IV A The Proposer's work plan demonstrates the ability and expertise to identify strategies regarding capacity and access that: 1) identify capacity and access patterns for MHPs on a regularly scheduled basis	5
 identify MHPs whose capacity and access patterns fall outside the monitoring capacity and access pattern either of MHPs of similar population and/or the statewide average (including both high-end and low-end utilizers) 	5
3) provide this information to DMH	5
4) in consultation with DMH provide or arrange for the provision of technical assistance to assist the MHP in determining the reason for their high or low capacity and access pattern or to assist them in developing strategies and interventions to provide the appropriate level of TBS	5
Total possible points IV A	
	20

Rating/Scoring Criteria	Maximum Points Possible
IV B The Proposer's work plan demonstrates the ability and expertise comply with stipulations in Emily Q. v. Bontá to provide information to plaintiff's attorneys on a quarterly basis including:	
Notices of initiation and continuation of TBS and denials of provider requests for authorization of TBS received by DMH from the MHPs	
2) Copies of certifications when MHPs have determined that TBS is inappropriate and that a beneficiary must be placed in a higher level of care such as a group home of Rate classification 12- 14	5
3) Lists of TBS providers obtained from MHPs	5
4) Information regarding training provided by or under the auspices of DMH	5
5) Information on any corrective measures taken by DMH in regards to implementation of TBS by the MHPs Information	5
Total possible points # IV B	
	25
TOTAL MAXIMUM POINTS POSSIBLE	120

e) Phase II

This phase consists of opening and evaluating the sealed cost proposals. All proposals that enter Phase II will have received a minimum of 96 points or more, and are considered fully capable of performing the required services.

f) The sealed envelopes containing the bid price and cost information for the proposals that meet the format requirements and standards shall then be publicly opened and read. The agreement will be awarded to the lowest responsible proposer meeting the requirements outlined in this RFP.

8) Award and Protest

a) Notice of the proposed award shall be posted on August 6, 2003 in a public place in the office of Department of Mental Health, 1600 9th street, Room 101, Sacramento, CA 95814), for a period of five (5) working days prior to awarding the agreement.

- b) If any proposer, prior to the award of agreement, files a protest with the Department of Mental Health and the Department of General Services, Office of Legal Services, 707 Third Street, 7th Floor, Suite 7-330, West Sacramento, CA 95605, on the grounds that the (protesting) proposer would have been awarded the contract had the agency correctly applied the evaluation standard in the RFP, or if the agency followed the evaluation and scoring methods in the RFP, the agreement shall not be awarded until either the protest has been withdrawn or the Department of General Services has decided the matter. It is suggested that you submit any protest by certified or registered mail.
- c) Within five (5) days after filing the initial protest, the protesting proposer shall file with the Department of General Services, Office of Legal Services and the Department of Mental Health a <u>detailed</u> statement specifying the grounds for the protest.
- d) Upon resolution of the protest and award of the agreement, Contractor must complete and submit to the awarding agency the Payee Data Record (STD 204), to determine if the Contractor is subject to state income tax withholding pursuant to California Revenue and Taxation Code Sections 18662 and 26131. This form can be found on the Internet at www.osp.dgs.ca.gov under the heading FORMS MANAGEMENT CENTER. No payment shall be made unless a completed STD 204 has been returned to the awarding agency.
- e) Upon <u>resolution of the protest</u> and award of the agreement, Contractor must sign and submit to the awarding agency, *page one (1)* of the Contractor Certification Clauses (CCC), which can be found on the Internet at www.dgs.ca.gov/contracts.

9) Disposition of Proposals

- a) Upon proposal opening, all documents submitted in response to this RFP will become the property of the State of California, and will be regarded as public records under the California Public Records Act (Government Code Section 6250 et seq.) and subject to review by the public.
- b) Proposal packages may be returned only at the proposer's expense, unless such expense is waived by the awarding agency.

10) Agreement Execution and Performance

a) Service shall start on the express date set by the awarding agency and the Contractor, after all approvals have been obtained and the agreement is fully executed. Should the Contractor fail to commence work at the agreed upon time, the awarding agency, upon five (5) days written notice to the Contractor, reserves the right to terminate the agreement. In addition, the Contractor shall be liable to the State for the difference between Contractor's Proposal

•	ice and the actual cost of ob ntractor.	taining performan	ce of the work	by another
	I performance under the agrermination date of the agreemer		ompleted on o	r before the
Preferen	ce Programs			
1) Small	Business preference - www.p	d.dgs.ca.gov		
apply for preference	rnet website provides informati the small business preference be program is optional, all p Identification Questionnaire.	ce program. Plea	ase note that a	Ithough this
Refer to	the following pages for ad	ditional Required	d Attachments	that are a

D.

part of this agreement.

ATTACHMENT 1

REQUIRED ATTACHMENT CHECK LIST

A complete proposal or proposal package will consist of the items identified below.

Complete this checklist to confirm the items in your proposal. Place a check mark or "X" next to each item that you are submitting to the State. For your proposal to be responsive, all required attachments must be returned. This checklist should be returned with your proposal package also.

<u>Attachment</u>	Attachment Name/Description
 Attachment 1	Required Attachment Check List
 Attachment 2	Proposal/Proposer Certification Sheet
 Attachment 3	Work Plan
 _ Attachment 4	Résumé(s)/Vita(s)
 Attachment 5	Sample Cost Proposal
 Attachment 6	Proposer References
 Attachment 7	Small Business Identification Questionnaire
 Attachment 8	Payee Data Record (STD 204)** (if currently not on file)
 Attachment 9	Contractor Certification Clauses (CCC) (current number)** The CCC can be found on the Internet at www.ols.dgs.ca.gov/Standard+Language.

^{**} These documents are not required with the Proposal package but are required upon reward of the contract

ATTACHMENT 2

PROPOSAL/PROPOSER CERTIFICATION SHEET

This Proposal/Proposer Certification Sheet must be signed and returned along with all the "required attachments" as an entire package in duplicate with <u>original signatures</u>. The proposal must be transmitted in a sealed envelope in accordance with RFP instructions.

Do not return Section C, Proposal Requirements and Information (pages 6 through 16) nor the "Sample Agreement" at the end of this RFP.

For RFP Primary Only:

A. Our all-inclusive cost proposal (includes budget for each fiscal year referenced in this RFP) is submitted in a sealed envelope marked

"Cost Proposal - Do Not Open".

- B. Place all required attachments behind this certification sheet.
- C. The signature affixed hereon and dated certifies compliance with all the requirements of this proposal document. The signature below authorizes the verification of this certification.

An Unsigned Proposal/Proposer Certification Sheet May Be Cause For Rejection

1. Company Name	2. Telephone Number	2a. Fax Number		
	()	()		
3. Address				
Indicate your organization type:				
4. Sole Proprietorship 5.	☐ Partnership	6. Corporation		
Indicate the applicable employee and/or corporation nu	mber:			
7. Federal Employee ID No. (FEIN)	8. California Corp	poration No.		
9. Indicate applicable license and/or certification inform	nation:			
10. Proposer's Name (Print)	11. Title			
12. Signature	13. Date			
14. Are you certified with the Department of General Services, Office of Small Business Certification and Resources (OSBCR) as:				
a. California Small Business Enterprise Yes No If yes, enter certification number:	b. Disabled Veteran Busines If yes, enter your service of			
NOTE: A copy of your Certification is required to be included if either of the above items is checked "Yes".				
Date application was submitted to OSBCR, if an ap	oplication is pending:			

Completion Instructions for Proposal/Proposer Certification Sheet

Complete the numbered items on the Proposal/Proposer Certification Sheet by following the instructions below.

Item Numbers	Instructions
1, 2, 2a, 3	Must be completed. These items are self-explanatory.
4	Check if your firm is a sole proprietorship. A sole proprietorship is a form of business in which one person owns all the assets of the business in contrast to a partnership and corporation. The sole proprietor is solely liable for all the debts of the business.
5	Check if your firm is a partnership. A partnership is a voluntary agreement between two or more competent persons to place their money, effects, labor, and skill, or some or all of them in lawful commerce or business, with the understanding that there shall be a proportional sharing of the profits and losses between them. An association of two or more persons to carry on, as co-owners, a business for profit.
6	Check if your firm is a corporation. A corporation is an artificial person or legal entity created by or under the authority of the laws of a state or nation, composed, in some rare instances, of a single person and his successors, being the incumbents of a particular office, but ordinarily consisting of an association of numerous individuals.
7	Enter your federal employee tax identification number.
8	Enter your corporation number assigned by the California Secretary of State's Office. This information is used for checking if a corporation is in good standing and qualified to conduct business in California.
9	Complete, if applicable, by indicating the type of license and/or certification that your firm possesses and that is required for the type of services being procured.
10,11 12, 13,	Must be completed. These items are self-explanatory.
14	If certified as a California Small Business, place a check in the "yes" box, and enter your certification number on the line. If certified as a Disabled Veterans Business Enterprise, place a check in the "Yes" box and enter your service code on the line. If you are not certified to one or both, place a check in the "No" box. If your certification is pending, enter the date your application was submitted to OSBCR.

ATTACHMENT 5

SAMPLE COST PROPOSAL WORKSHEET

Instructions:

1.	Submit one cost proposal for each year of the contract (FY 2003/04, FY 2004/	/05,
	and FY 2005/06)	

- 2. The total budget for each year must not exceed \$100,000
- 3. For each year, a maximum of \$50,000 may be allocated for activities associated with TBS Provider Minimum Qualifications, and a maximum of \$50,000 may be allocated for activities associated with capacity for and access to TBS.

	Assistance with Provider MQs	Capacity and Access	Total Both Components
Personnel Services	\$	\$	\$
Operating Expenses Travel Expenses	\$	\$	\$
Totals	\$	\$	\$

ATTACHMENT 6

PROPOSER REFERENCES

Submission of this attachment is mandatory. Failure to complete and return this attachment with your proposal will cause your proposal to be rejected and deemed nonresponsive.

List below three references of similar types of services performed within the last five years. If three references cannot be provided, please explain why on an attached sheet of paper.

REFERENCE 1				
Name of Firm				
Street Address	City	State	Zip Code	
Contact Person		Telephone Number		
Dates of Service		Value or Cost of Service		

Brief Description of Service Provided

REFERENCE 2			
Name of Firm			
Street Address	City	State	Zip Code
Contact Person		Telephone Number	
Dates of Service	Value or Cost of Service		

Brief Description of Service Provided

REFERENCE 3			
Name of Firm			
Street Address	City	State	Zip Code
Contact Person		Telephone Number	
Dates of Service		Value or Cost of Service	
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Brief Description of Service Provided